

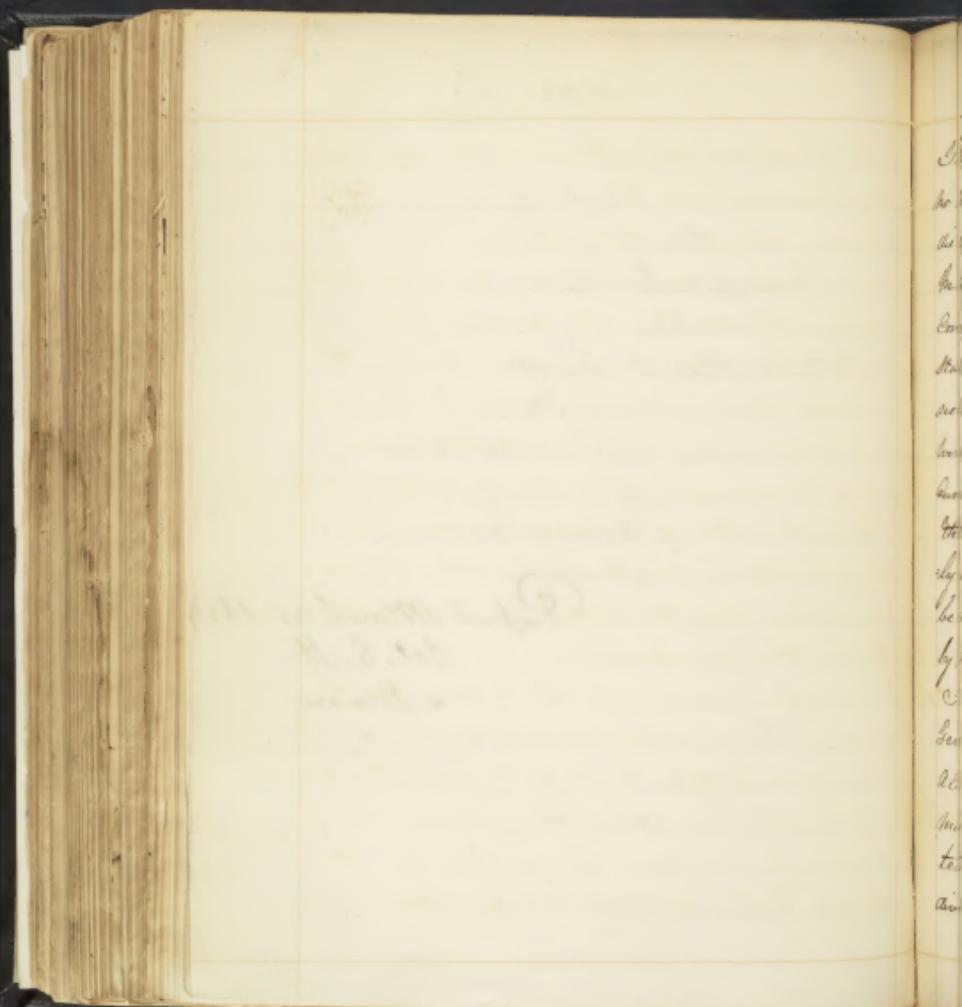
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On  
Inaugural Essay  
On  
Intermittent Fever  
By  
Peter Molar  
Pennsylvania

Dated March 25 1824  
W. S. H.  
Dean



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Perhaps in the whole Catalogue of human diseases  
No one has been more fully described or frequently  
discussed, than the Intermittent Fever.

In most parts of our Country it is one of the first  
Complaints attracting the attention of the  
Student, and continually presenting to the  
notice of almost every Practitioner. Yet notwithstanding its frequency of occurrence, and  
our intimacy with its symptoms, and treatments,  
the exact nature of its Causes has never been fully  
understood. I say Causes for I think it will  
be readily admitted that it may be produced  
by more than one Cause.

From time immemorial Intermittent  
Fever has been Considered as depending nearly  
altogether for its existence on Miasma or  
Marsh Effluvia. I think this idea will not be  
tenable by any one, who will consider the  
diversity of Climate & Soil and Circumstances under

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under which this disease has appeared among us for  
the last three years, and during seasons of so totally  
different & diversified a nature. That Marsh effluvia  
may produce this Complaint I make no doubt, may  
I believe wherever this effluvium abounds, it will  
to a certainty create more or less of it. At the same  
time it appears impossible to attribute all the  
Intermittent we have had for the last few years  
to Marsh Miasmata. In fact I have known its  
prevalence in such situations, where no one could  
believe it possible noxious effluvia could be the  
Cause, and whence until within the last three years  
it has been wholly unknown for thirty years past.  
I allude particularly to that fine tract of Country  
ranging from the Schuykill on the West to the  
Delaware on the East. Commencing at the Pocono-  
pack and stretching North & East through the  
County of Bucks. this Range is perhaps as fine  
and salubrious as any part of our Country, the

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Rivers are for the most part bold and rapid in this  
Course, confined to their Channels, steep and precipitous  
banks, forming but little or no meadow or marshy  
ground, not sufficient to generate enough effluvia  
to injure the Country to any extent. Over much of  
this tract I have travelled "on foot" and was in-  
duced to consider it as one of the thing and almost  
inaccessible fortresses of Health. Yet there this few  
parts of our Country suffered more from the Inter-  
mittent. I am also acquainted with some parts  
which have long been noted for the prevalence of this  
Complaint, which escaped nearly altogether during  
the general invasion last summer, Salem N. J.  
is a remarkable instance of this nature, the last  
season when the disease was ravaging every other part  
of the State Salem hitherto the very nidus of "fever &  
ague", experienced almost an entire exemption.  
This is more Extraordinary viewing the situation of  
this little town surrounded as it is by extensive marshes.



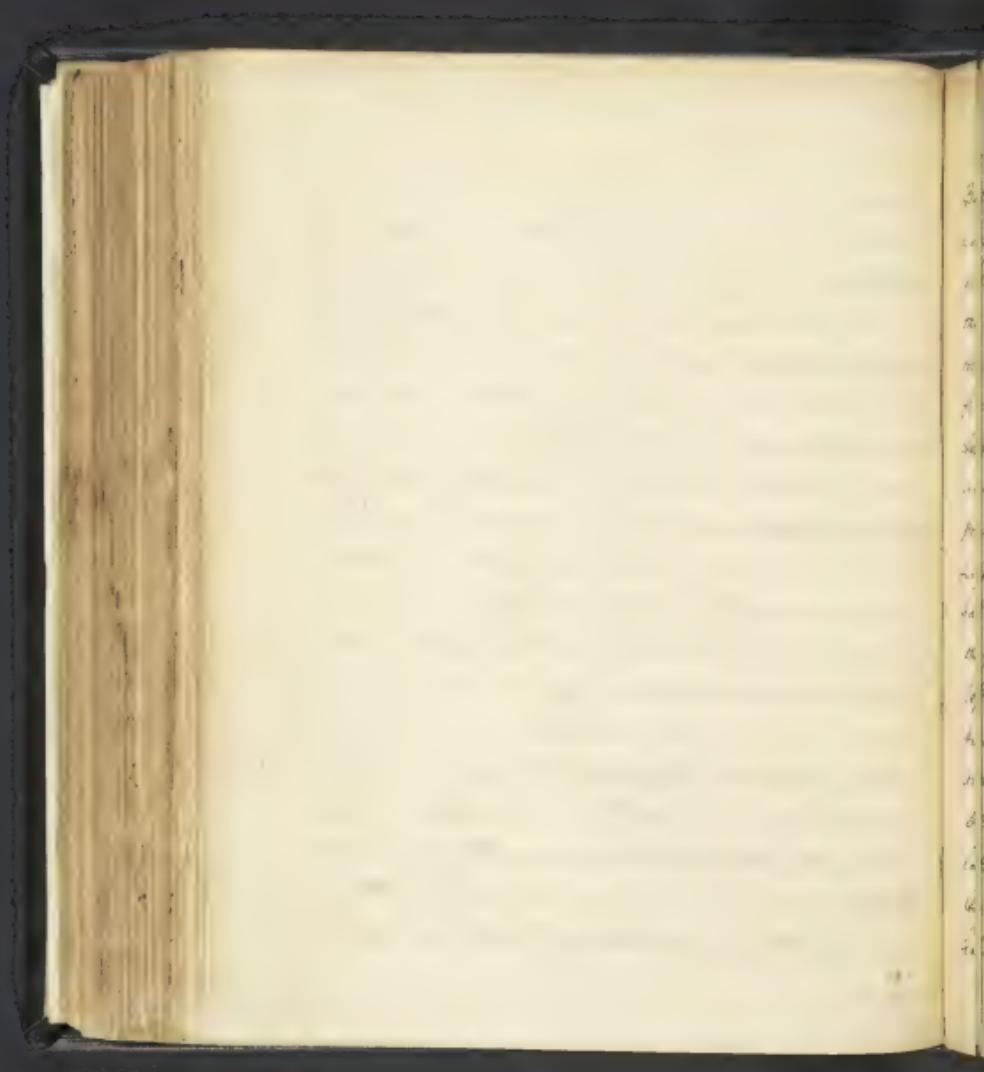
Meadows and ponds of stagnant water. Suspecting this location during the last summer it appeared to me if Miasmatæ could claim indisputable sovereignty over any place upon Earth, surely here was the spot. Yet as above stated Salen remained almost free from the scourge.

Another circumstance has forcibly presented to my mind opposing the idea of unity in the cause of Intermittent fever viz; the remarkable difference of the summers of 22 and 23. the summer and first autumn months of 22 were extraordinary for their great heat & dryness so much in places the danger to our domestic animals seemed really imminent from the scarcity of pasture and the diminution of the waters (the preceding summer also was of this kind tho' not so uniformly hot and dry) in this then the summer of 22 the inter and remittent fevers (for they were much alike both of a bilious nature and frequently running into each



other periodical to a great degree the waters were made  
sulphurated. The summer of 22 was the earliest & most perfect  
of the two preceding - no common man could perceive  
any difference in temperature, at no certain hour the heat & breath  
of sufficient duration to injure the herbage & affect  
the wings. Yet behold under every diversity - the same  
Epidemic raging through the same territories  
possessing the same attributes, and stamped by the  
same characteristics. There was this difference how-  
ever, It commenced for the most part a month earlier  
rather more highly bilious and I think when once  
it had hold on a patient it was rather more tena-  
cious - not more obstinate or difficult of cure but  
more apt to recur when cured.

It may be said by some that the difference of the  
seasons of 21 and 22 operating in a different way  
would ultimately produce precisely the same effect  
to the master and his grounds enabling them to  
ingest the same quantities of deleterious effluvia



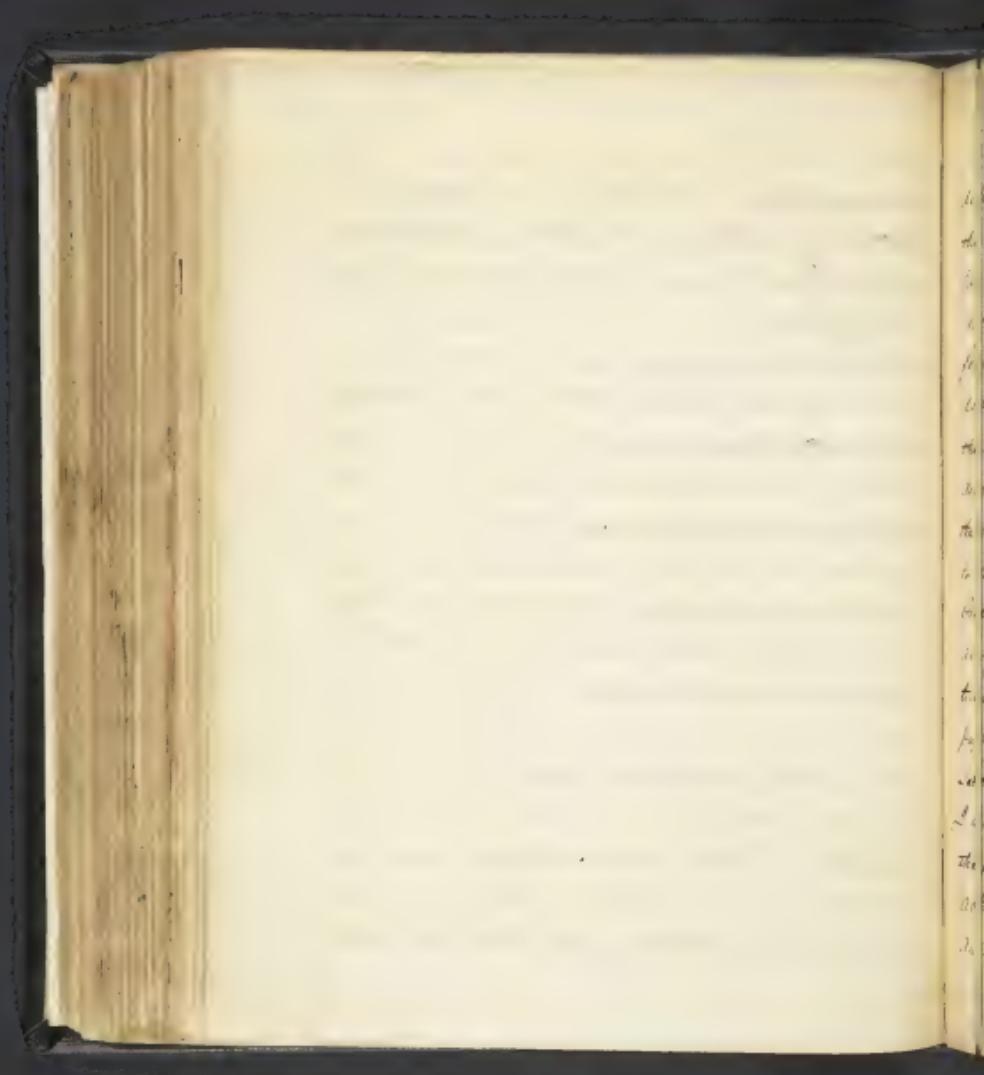
Be this as it may - it will hold good only as regards  
 breezy situations, but will not account for the high  
 and dry inland districts, being equally affected by  
 the disease in seasons so very dissimilar, nor  
 can there fail to be a doubt that the insulation  
 from the Earth's surface will be greater in moist  
 seasons, yet the difference will not be so great as we  
 would a priori suppose, for it has been proved by  
 positive experiment that when the immediate  
 surface is apparently free from moisture, great ex-  
 halations are admitted from the depths of the earth,  
 the quantum has been calculated and has been  
 reported by Sumner in his work on Botany to be  
 2000 gallons from an acre in 24 hours, on an  
 average throughout the year.

I cannot agree with Dr. [unclear] who considers this eva-  
 luation from the earth as so injurious to the human  
 constitution, it is unceasing and natural to every  
 animal we could be able to test it. Again were this

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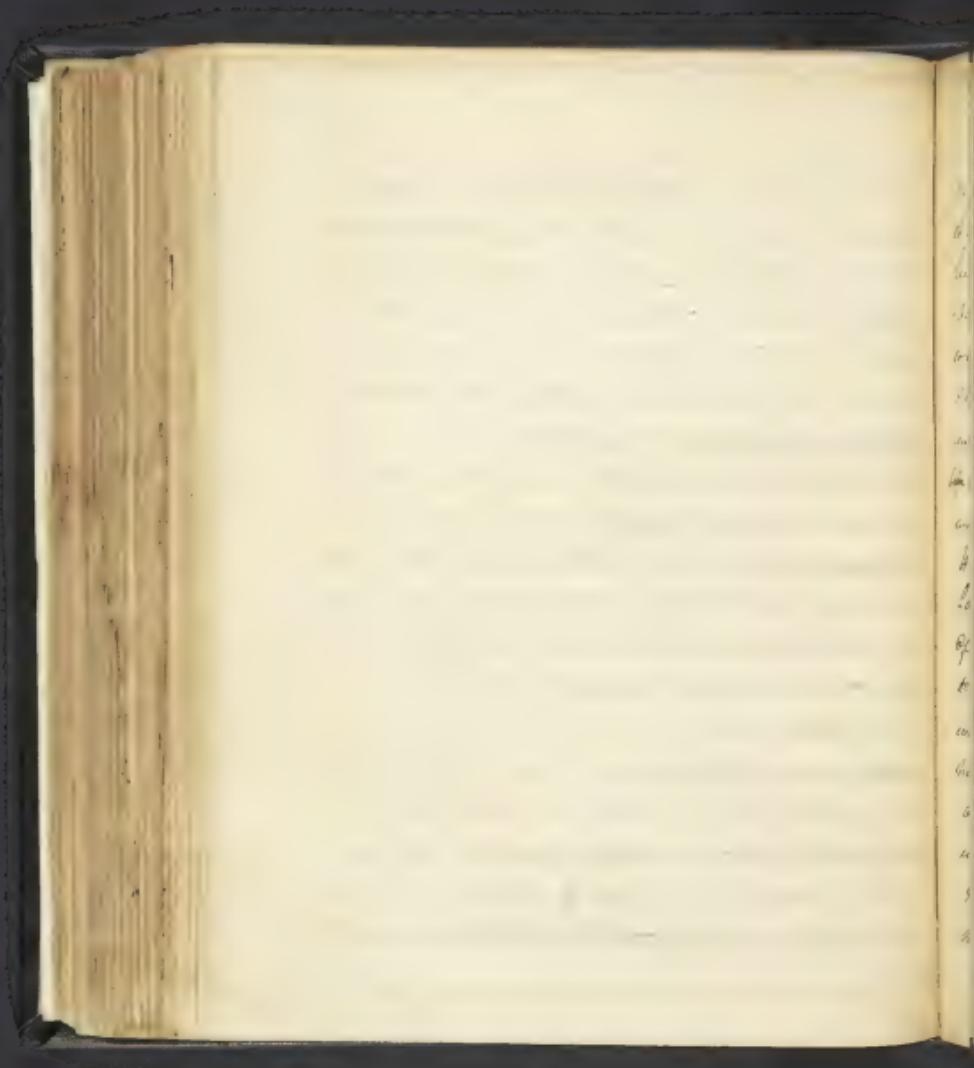
a cause of fever we should in every situation be continually destroyed by its effects, seeing that it is in continual operation in every place where the surface is not frozen.

It might be considered as I object to these as the causes of this complaint, that I should state what are the true causes, but indeed would be as little as could be expected, little as it is however I shall leave it for the present, for as yet I have never been able to satisfy myself this point. I will only say when the Intermittent fever exists in the epidemic form as it has done for the last three years, it seems probable that it depends on a distemperature of the atmosphere, but the cause of such distemperature, its nature or exact mode operandi on the system, I confess myself wholly ignorant. The theory of animalculæ is only plausible because we know so little of them whether they really exist or not, that we are enabled from dispo-



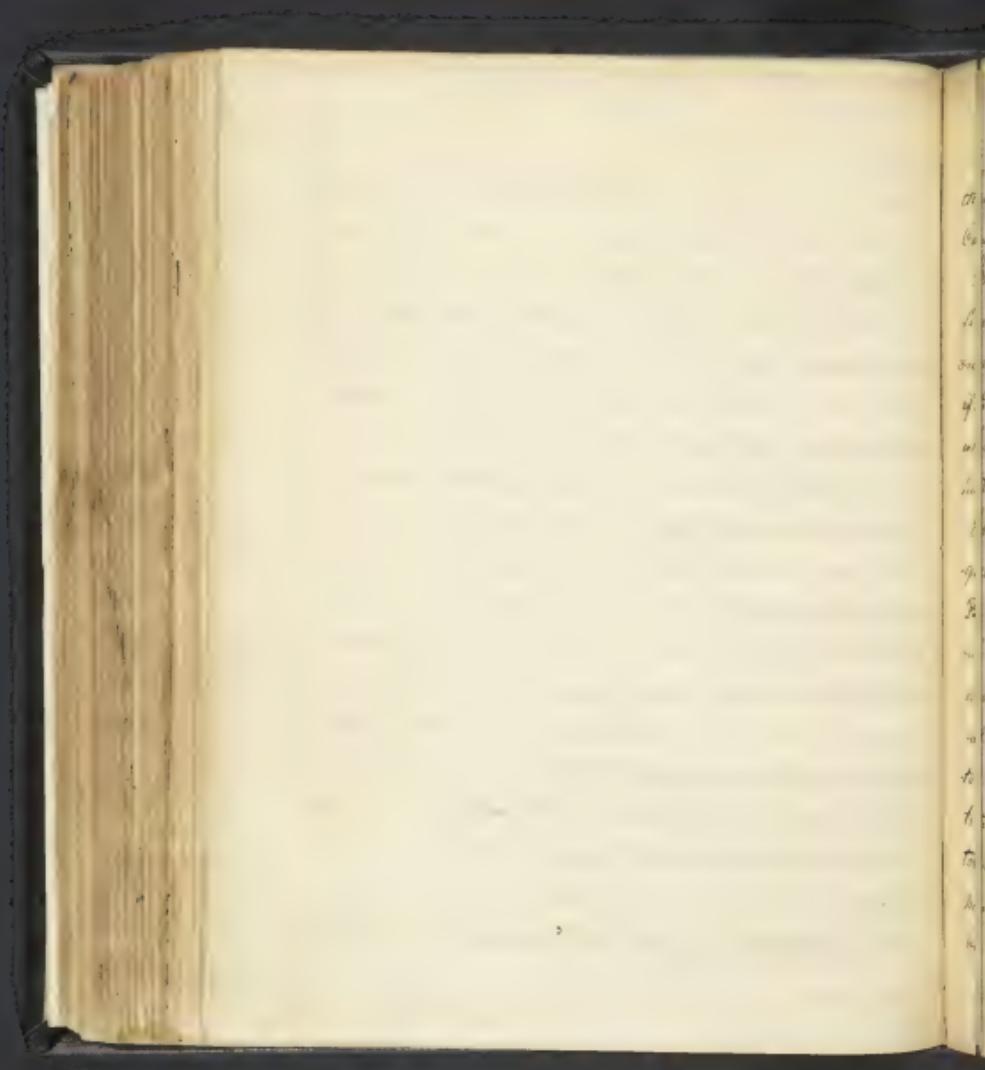
disproving it, by any positive facts, and indeed this appears pretty much the amount of all we can say on the vague and uncertain theory of atmospheric changes of the air as a cause of this fever. Men have supposed all Diseases to be derived from Causes of this nature. this is making the atmospheric air subject to many and diversified disturbances, and yet we know the most accurate Observers have never been able to discover these changes by their ingenious experiments. On this subject I could wish to enlarge but being altogether speculative, it would occupy more time than in propriety could be allowed in a paper of this nature.

Let the cause of Intermittent Fever be what it may I am utterly at a loss to say in what manner the peculiar features of the disease are induced acting in the first instance on that prime mover, the Centre of Vitality the stomach - to whose myster-



mysterious guidance every part of the system appears to observe the most scrupulous obedience, the morbid actions being induced as by the mystic power of Providence & obeyed throughout the whole system, but how & in what precise manner all this is done, how a still and slow process until there occurring at certain and defined intervals of time, I believe has never been intelligibly explained - Nor will this be done with our present stock of physiological knowledge. It has been asserted that exposure to cold has been lately when combined with moisture is the cause of this complaint. I am disposed however to think that this is a very rare cause else we should meet with it often in high latitudes and also in the middle of winter. On the contrary it is a complaint almost peculiar to warm climates and to the warmer seasons of the year!

It is fortunate for us that the treatment of Intermittent fever is far better understood

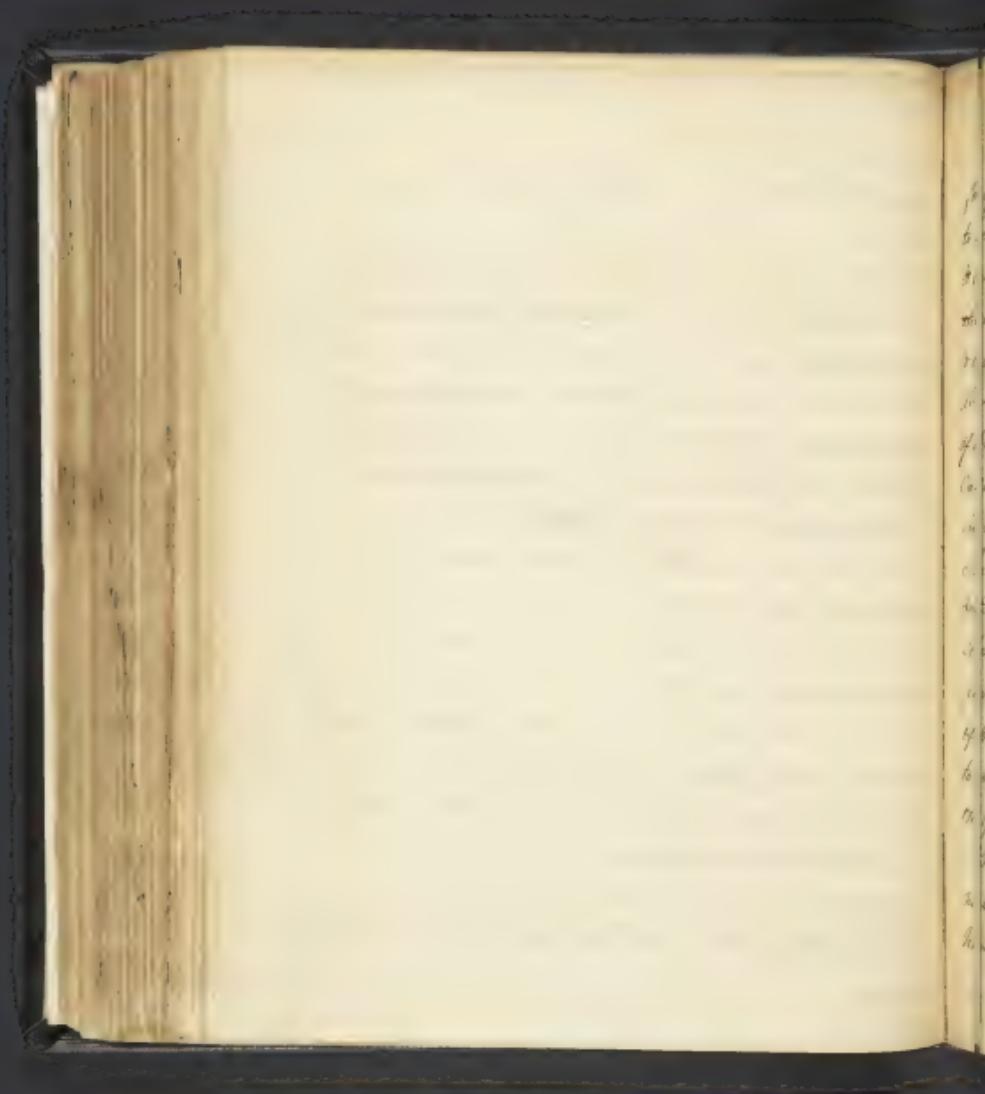


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than the nature and modus operandi of its  
Causes.

In pursuing my Remarks on Intermittent  
Fever. It might well be thought incumbent  
on me to give a regular and succinct account  
of its course as well as the various treatment  
which it has met with in different periods of its  
history - this however I do not contemplate  
I shall confine myself to the symptoms pro-  
gress and terminations of the disease ,

By a Paroxysmal intermission disease we  
intend those more or less regular of Interven, which  
are returned until we wait for any purposes of prac-  
tical utility thus we have the quotidian, tertian year  
ten the double tertian the double quartan so the triple  
tritum triple quartan &c And some have extended the  
term to a much wider period thus the hebdomadal the  
biennia, bimonthly, and even yearly (annual)  
in these Relations we can now place much reliance



for if such ever did occur it must have been casual and  
to be accounted for only on the doctrine of chance.  
Certainly does happen that from their cause or other  
these primary forms of Intervenient more very much  
indeed as to assume the appearance of one or other of the  
above mentioned forms. But whenever the recurrence  
of the paroxyton becomes so irregular they have been  
called erratica under which general title should be  
included all these varieties.

The only legitimate forms then are the quotidian,  
tertian, and the quartan, & was the opinion of the  
celebrated Gadjes that the tertian was the only  
primary form, all others being merely varieties  
of this. Of these three forms the tertian is said  
to appear most frequently thus quotidian lastly  
the quartan which is rare.

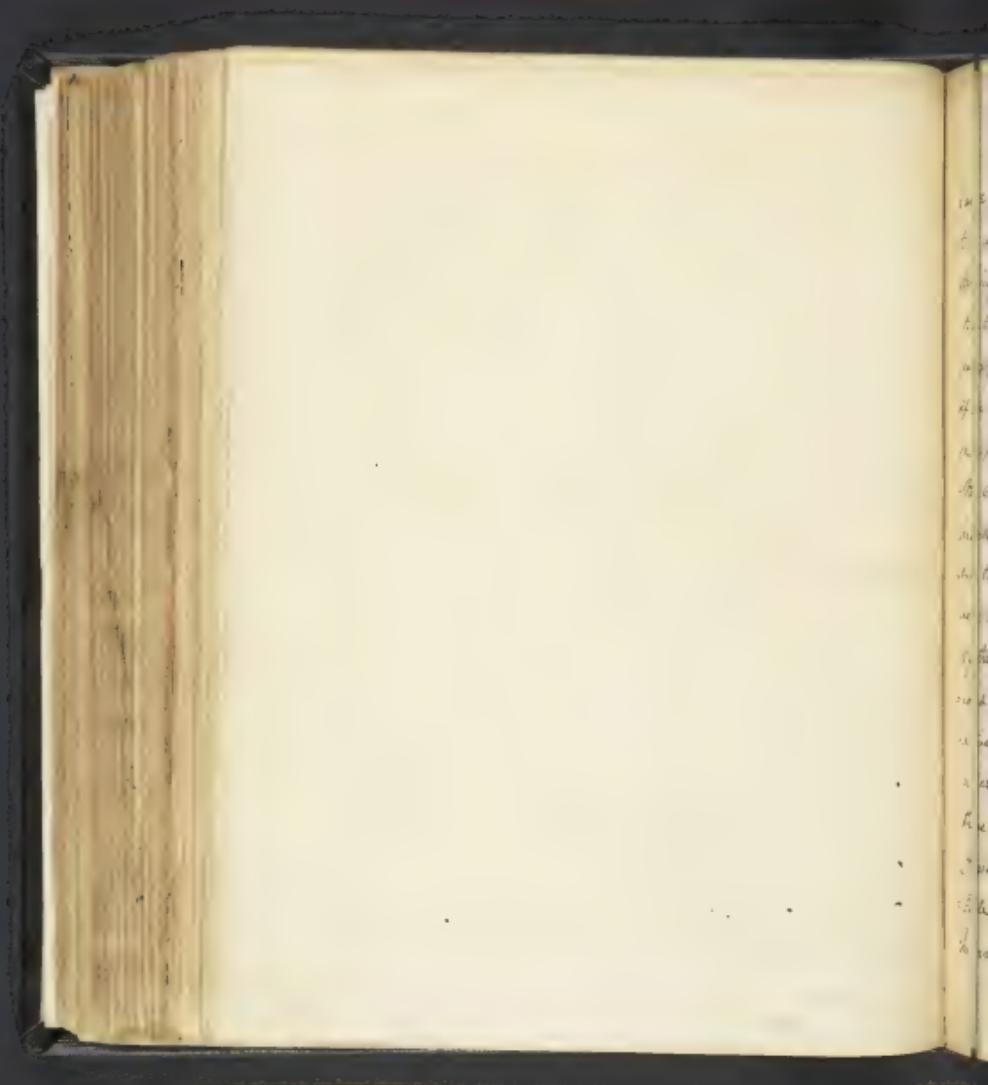
Whos bane laid man with the quotidian mostly  
makes its appearance in the morning the tertian at  
noon and the quartan in the evening.

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Under whatsoever form an Intermittent may make its appearance, the general Symptoms are similar, and are such as attend upon the three Stages into which a tertian may be resolved viz, the hot Cold and sweating Stage. It would be superfluous minutely to describe these Symptoms, for Connecticut State I will hasten to sketch them. The Cold Stage is generally preceded by a sense of weariness of and oppression of both mind and body, the pulse is rather weaker than natural, with a dull obtuse pain in the head back and joints.illness now seizes the patient, the surface becomes shrivelled pale and rough, imparting the sensation of cold when the hand is applied, then increasing the pulse becomes weaker and quicker with more or less difficulty of respiration, nausea or vomiting with torpidity of mind, all the animal functions impeded secretion and excretion stopped, or nearly so, according to the state of things continues for two three or four hours sometimes a shorter period - then one of these may



Symptoms abating gradually go off, thus the skin gives way, pulse slower and fuller the surface glazed and teared, secretions mutually restored respiration more easy, the hæmorrhage or perspiration increased at this period small large quantities of urine are discharge by mouth, when in such state increased heat much of violent sometimes Roman or Indian stars increasing from the hot stage which lasts from four to twelve hours is often proportional to the duration or violence of the cold stage, this tho' a general fact is not invariable for instances are on record where the cold stage was wholly wanting or scarcely perceptible, as these symptoms going off the sweating is now assisted in by a perspiration streaming on the surface, pulse is soft and natural the skin dry and moist, pain ceasing or diminishing, and all the animal functions become natural, this puts an end to the paroxysm, and for the most part the patient falls into a languid sleep, in this stage the bowels mostly discharge their contents, with



large quantities by side, the urine is also augmented, depositing a latencies sediment, there then are the usual striking symptoms constituting a paroxysm, and the patient now remains as well as usual until the next paroxysm, which is sooner or later according to the type of the disease - As now described are the appearances in a plain Case of Intermittent Fever. But in many instances we meet with those which would tax very much to harass the Practitioner were he unacquainted with their nature, these anomalous symptoms were very common among the sick and convalescent of the Epidemic of our last summer, these anomalies could symptomatize, may be either of a positive or negative nature thus an Intermittent might exist without a cold a hot or an sweating stage, the absence of one of these stages would form a negative symptom - These anomalies are very diversified and to describe them would be to add to a regular attack of Intermittent symptoms of account but by other known 12



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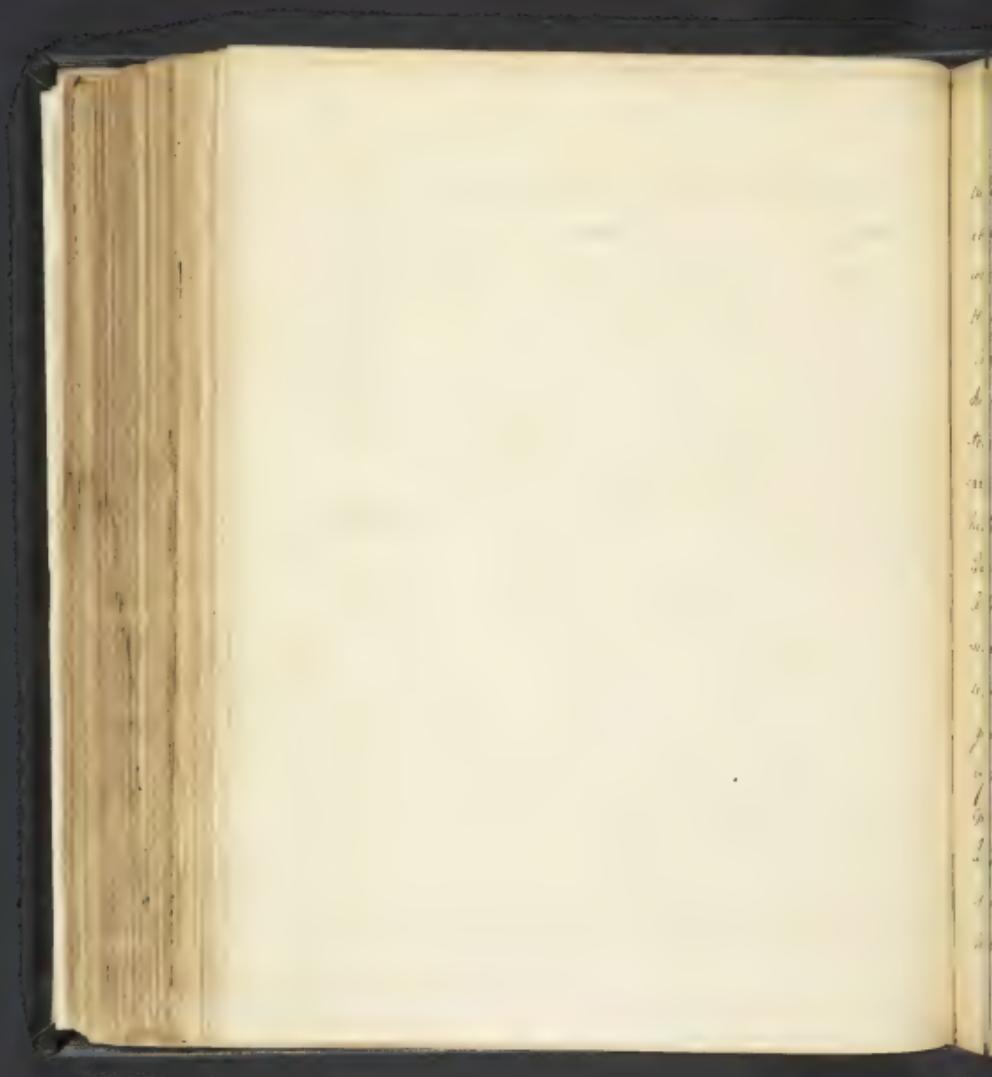
disease or diversified are they, -  
When this fever is epidemic nothing is more  
common than for it to be complicated with, or at  
least for it to take in the form of, the disease which  
may be then prevalent, since we have it associated  
with dysentery, diarrhoea, & scrofula, &c during  
the last visitation a case of Intermittent fever under  
my notice attended by complete loss of vision  
The patient an elderly lady of very delicate constitu-  
tion attacked with ~~obstinate~~<sup>intermittent</sup> ~~for~~ two or three hours from her  
first attack no sight was totally gone, at this time  
there was no appearance of nausea in preference  
then to disturbing this organ by an emetic, & waited  
the operation of Calomel & sij which I had previously  
administered, in less than an hour from its loss  
her vision was restored & attributed this to the oper-  
ation of the Calomel conveying the bile from the  
stomach to the intestines thus relieving the stomach.  
What was singular in this instance the patient

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never experienced a complete cold stage, the attack from the commencement retaining a low form associated with periods of great quietness, so much additional heat was required to every half hour, this I thought proceeded from the narcotic impression made on the stomach by the bile and thence extended to the whole nervous system - for tho' the stomach did not appear much affected in the first instance a long time elapsed before its wonted capacity for digesting accustomed food was restored -

But it may not be amiss to lay a word or two on the Prognosis and diagnosis of the Complaint -

In the commencement if the prolixity be severe and of long duration - the prognosis bad and in consequence will be unfavourable for the strength of the patient, great irritability of stomach particularly if it leads to inflammation of that viscus is unfavourable, this sometimes happens and the patient is utterly unable to retain any active medicine at, and the irritation and



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inflammations until the patient sinks prostrate such  
case took place in my neighbourhood last summer  
when a very intelligent practitioner declared every  
thing he could devise was utterly incapable of allay-  
ing the irritability of the stomach, and the patient  
died & haunted - He had in a low infibled state of in-  
termittent of some standing indulged too far his ap-  
petite producing as was supposed irritation & inflam-  
mation of stomach, this never ascertained by post-mortem  
examination -

A disposition in this case to run into a low fever  
and烽 is also unfavorable hence a quotidian  
is more difficult of cure than a tertian a tertian than a  
quartan - Delirium and Convulsions are incited and  
by some as unfavourable occurrences - First when  
speaking of the Epidemic of Bengal says, when del-  
irium occurred as an early symptom the patients  
generally died in the fourth paroxysm - last summer  
seen while in the country one of his neighbours



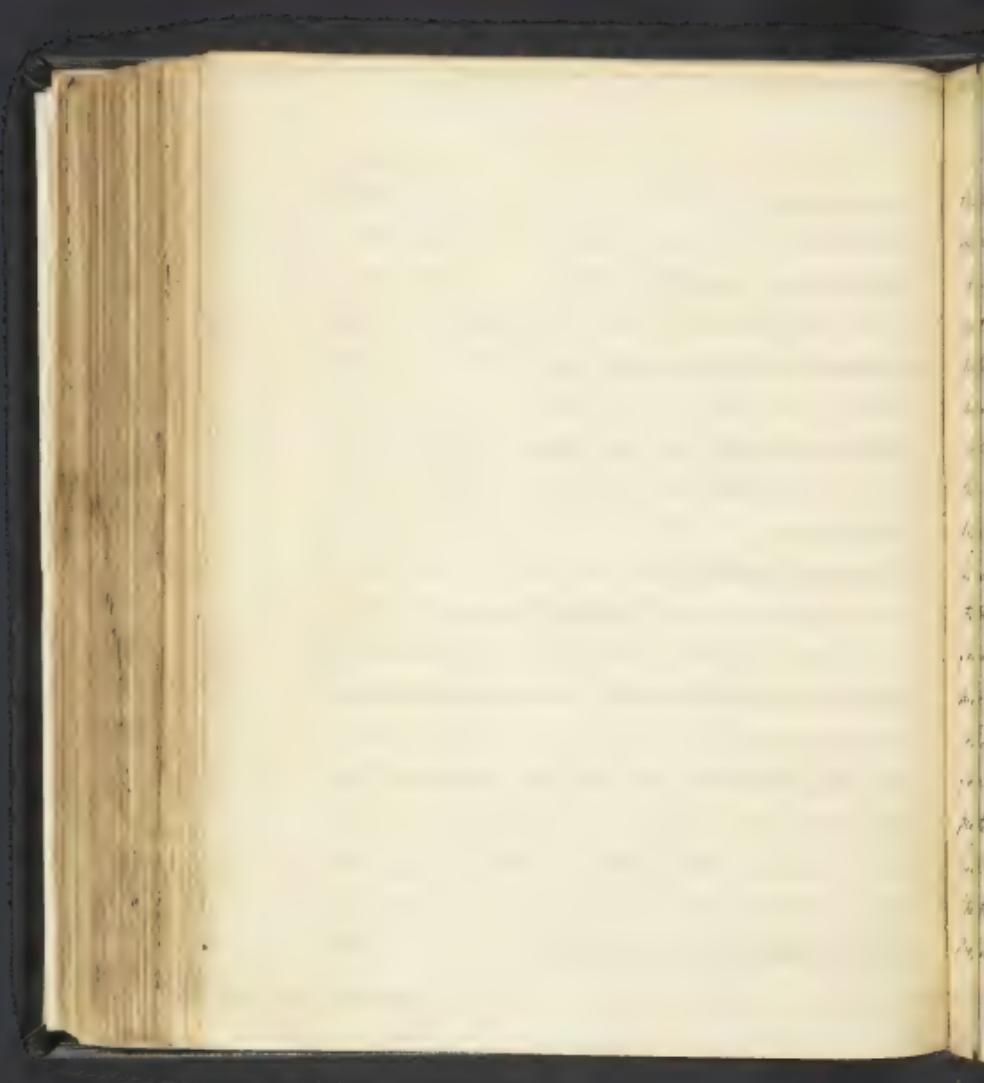
Sent for me, I found him labouring under an attack  
 Of irregular intermittent, when I saw him he had  
 after tho not a single pulse, which ticky fine, a wild  
 affrighted appearance, and flight delirium. At  
 once took from his arm eight or ten drops of blood,  
 this relieved him immediately. He tooe on the use  
 of astringents for what he called a vapourary, which  
 he expected proved a diarrhoea the discharges con-  
 sisting chiefly of bile tinged with blood, indicating  
 this a natural effort of the system to rid itself of the  
 offending cause. Cut off the astringent mixture, and  
 allowed the vein to runne more tranquilly, and he was  
 got entirely freee, here there was delirium from the new  
 onset of the attack and yet a milder case I never  
 saw. The favourable times are the intervals of the above.  
 As the diagnosis of this complaint nothing need be  
 said - there is not one disease with which it can be at all  
 confounded by those known, indeed there is no similarity  
 existing between the two, having each preceded by a

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This followed by a short interval &c - Intermittent  
Fever attacking a previously weak or debilitated  
Constitution must be considered unfavourable - tho'  
there are some exceptions - for it has happened  
that Mania and Phthisis have been cured or much  
relieved in this way - as above described then  
after the Convalescence has fairly set in it will run a  
longer or shorter course depending on the practice  
instituted -

If the vitality of the Constitution has not been previous  
ly impaired in a great majority of cases this Con-  
plaint will terminate happily, it will however sometimes  
happen in opposition to the iron disease, flabby treatment  
and the most assiduous endeavours that some of these  
Cases will prove very obstinate and unyielding  
continuing for a great length of time in an irregu-  
lar manner, gradually weaning down and under-  
mining the strength of the patient, and rare when  
finally relieved it will be found to have laid



to your relatives & others - I am for ever & will be  
willing to receive of them any sum off the Rent due,  
which it remains to get in that you may have  
enough to meet your general and local expenses. Your entry is  
habitually contentious, & we are poor, and this is almost if  
not worse.

I have been called in the treatment of my patient.  
This has been recommended in various medical coun-  
cils and in different parts of the world. I would  
entirely withdraw from practice in this place to obtain  
the absolute and practical treatment & would then  
have had been separated at different times, and this  
last so the reward and stimulate the most upon  
such such treatment as is connected. I shall there-  
fore submit me to reviewing the less appropriate  
practice of the present time, particularly such as I  
have had an opportunity of seeing myself.

The treatment however always divides itself into that  
of first being a paroxysm and that during the



appyrexia, the treatment varies also in the different stages of the paroxysm. But in the cold we can do very little and fortunately very little is here required - the only indication is to bring about the hot stage as soon as possible, warm drinks, warm applications, fomentations are sometimes had recourse to, these, however, must not be pushed so as to increase the expected hot fit, emetics are doubtful in this case particularly if the depression be great. When the hot stage has been induced counterindications are no less plain than in the former, viz to allay fever and irritation and guard against local determination, to fulfil these indications, rectal enervation is in many instances to be resorted to and this seems most naturally but from a her. limited observation this appears to be very seldom wanted, particularly as the disease abates most suddenly. I am informed since highly respectable Practitioners very rarely or never employ it, however the weak is much affected & often



local determination; therefore the invalid must not be neglected. In the Constitution we find no eminent native or medical authorised to induce irritation and violent excretion and practice now prevalent in India this has been the established mode of managing the treatment of Intermittent for a long time.

active purges not only relieve the stomach and bowels of their irritating contents, but also distract from the insulating mass of fluids various Cooling diaphoretic acids are now also injected to - I do not know whether to get the idea from France or India - and it has often appeared to me concerning such the words upon capitals and being patients at the same time under the effects of purgative medicines also taking various leathistic articles and observing observing the difficulty of producing perspiration as well as perspiration under such circumstances - that this plan must certainly be consonant - for it is more generally admitted that most of our remedies act by a stimulating

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obtaining directly or indirectly. It is however evident that two  
 qualities of this similar action cannot go on in view and  
 therefore either one or the same time will have its  
 superiority, if this be true the practice set by no sound  
 physiological views - It is stated some where, and  
 apparently with some force, that the excretion of mucus  
 serves during the first stage of fever, is of doubtful efficacy  
 by tending to increase the heat and irritation, a point  
 in this appears rational & however have never witnessed  
 such ill effects, admitting it to be the case, we are  
 in a greater dilemma than ever, what are we to do  
 & certainly would be productive of more inconvenience  
 irritation to allow the noxious contents of the stomach  
 and bowels to remain until a solution of the fever,  
 than to risk the consequent irritation of a rumen -  
 again in Entombed, fever and other diseases we do  
 not consider these ill effects, and if we did we  
 could not avail them, the few instances being  
 started for to deavour to bring about a perspiration

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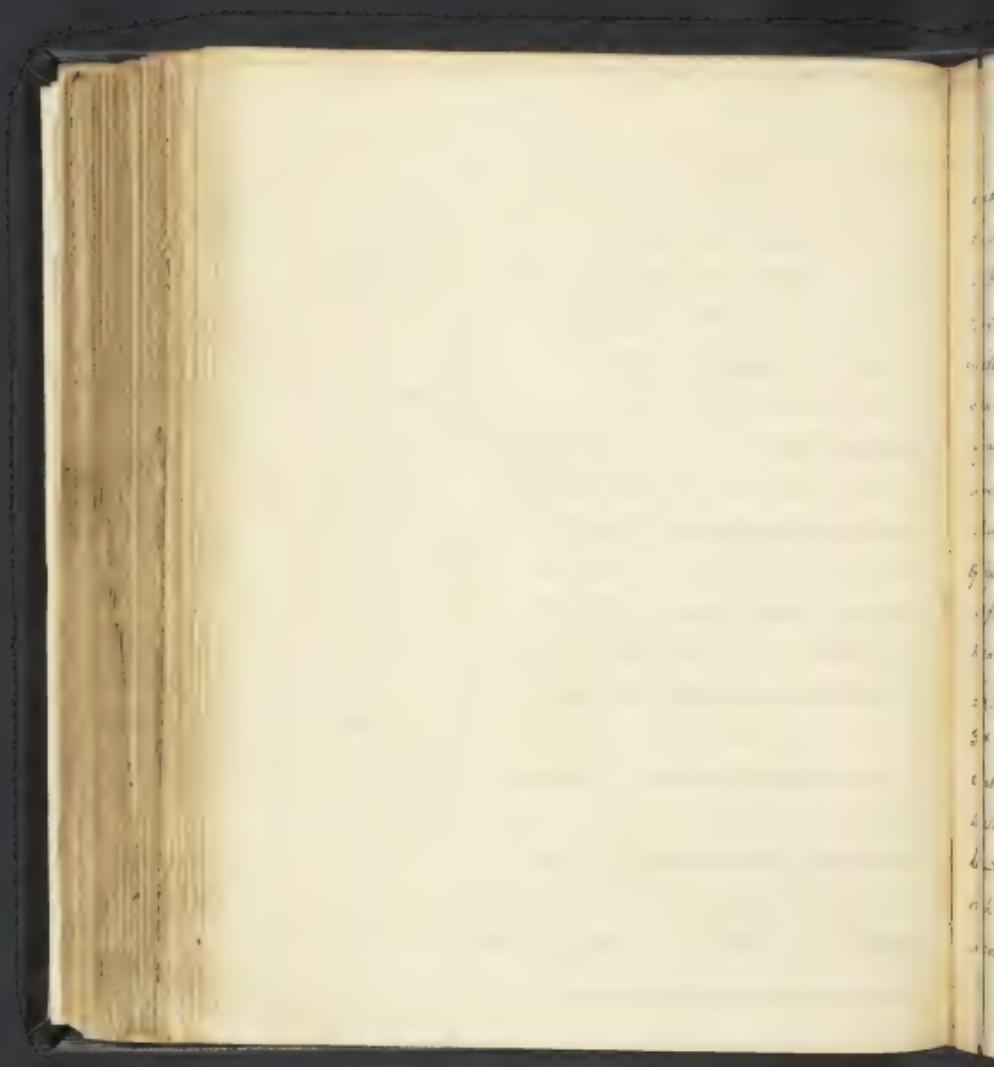
28. u

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of internal and external means this will be a common  
at we have a certaine of the Paroxysms - in this  
respect lies the treatment for, reverting a return of  
Lust until Constitutes the general involution, we  
are obliged merely to palliate.

The induction is to be anxious & giving a strict  
attention to diet, air and exercise, fed by our tonic  
remedies, and to have notice made to some & un-  
less the most benignant attention is paid to the exact  
observance and proper regulation of the regimen  
our best endeavours with other presents such in kind  
as tea & coffee more invigorative and invigorating  
and at the same time, let the cause be what it may  
appear to originate in the Stomach, that disease is mostly  
found in a debilitated and weakened condition  
hence the diet should be very weak as in Hypochondria  
& Capital it may be strengthen and allowing a greater  
latitude of choice - this like other rules admits of  
exception & oftentimes will be necessary in so



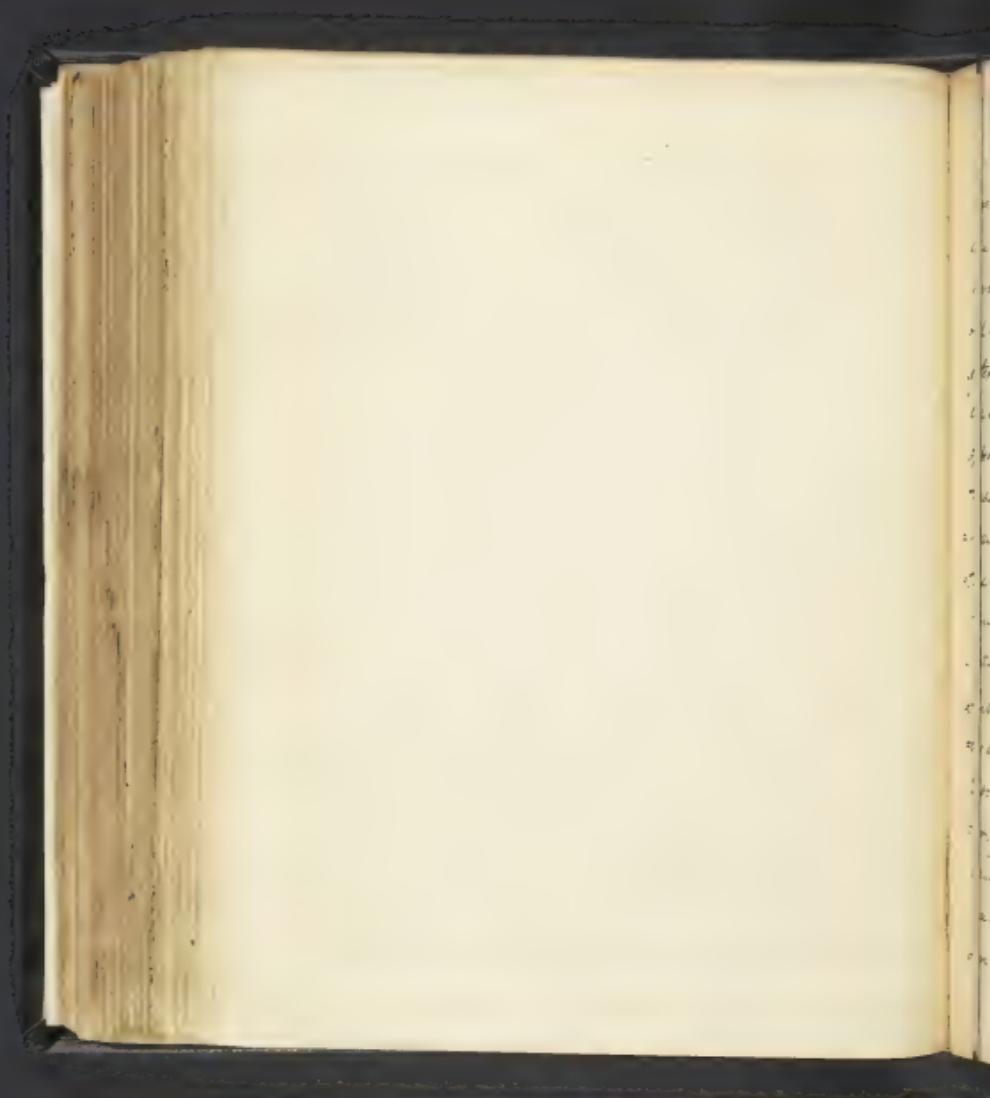
obscure incrustations & tubercles, however, in such case  
the ulcer would be simple and weak, until dried  
it is rendered soft purpling & in some cases thick tender  
etc, this distinction is seen in frequent inter-  
mittents - Hartington obviated all objections in  
concern to the use of Frices -

upon the points of argument in this debate he has  
given rise to more difference of opinion than the question  
itself - I will now state in what precise state  
of intermission we are to commence with Frices -

so far as my judgment will go this period is by no  
means a fixed one, it is varied by several circumstances  
in 1st season of the year - 2nd nature of the epidemic -

3rd climate - 4th age of patient - 5th constitution -

Sixt - It has not been unusual that an inflammatory  
disorder is generally attendant on several intermissions  
then we are prevented from resorting to tonics until  
such condition be more or less allayed and before we can  
accomplish this in many cases, the second or third, or



dangerous heat have subt. & been more than we can yet  
adequately understand the third agency - Of the cases which  
have fallen under my immediate cognizance I have  
but one in which I resorted to the Peruvian Bark until  
after the second appearance - In the latter part of summer  
we see but little of this disposition on the other hand an  
opposite tendency is more to be observed in some of  
these cases we administer tonics from the very con-  
veniences. Indeed it was the opinion of the celebrated  
Dr Stelzendorf that Bark was not indicated in any  
period or in any stage of the Complaint.

Nature of the Epidemic - This differs in different localities - thus at the Seaside it will be observed in about 10 days  
by another will say & even try, should in the one case we  
conceive two or three jaundiced in the other incur-  
ing to tonic Remedies.

Epidemic - In the climates of S. America is the most violent more  
severe and rapid in its course - so much so  
that writers on tropical Epidemics assert that in nine

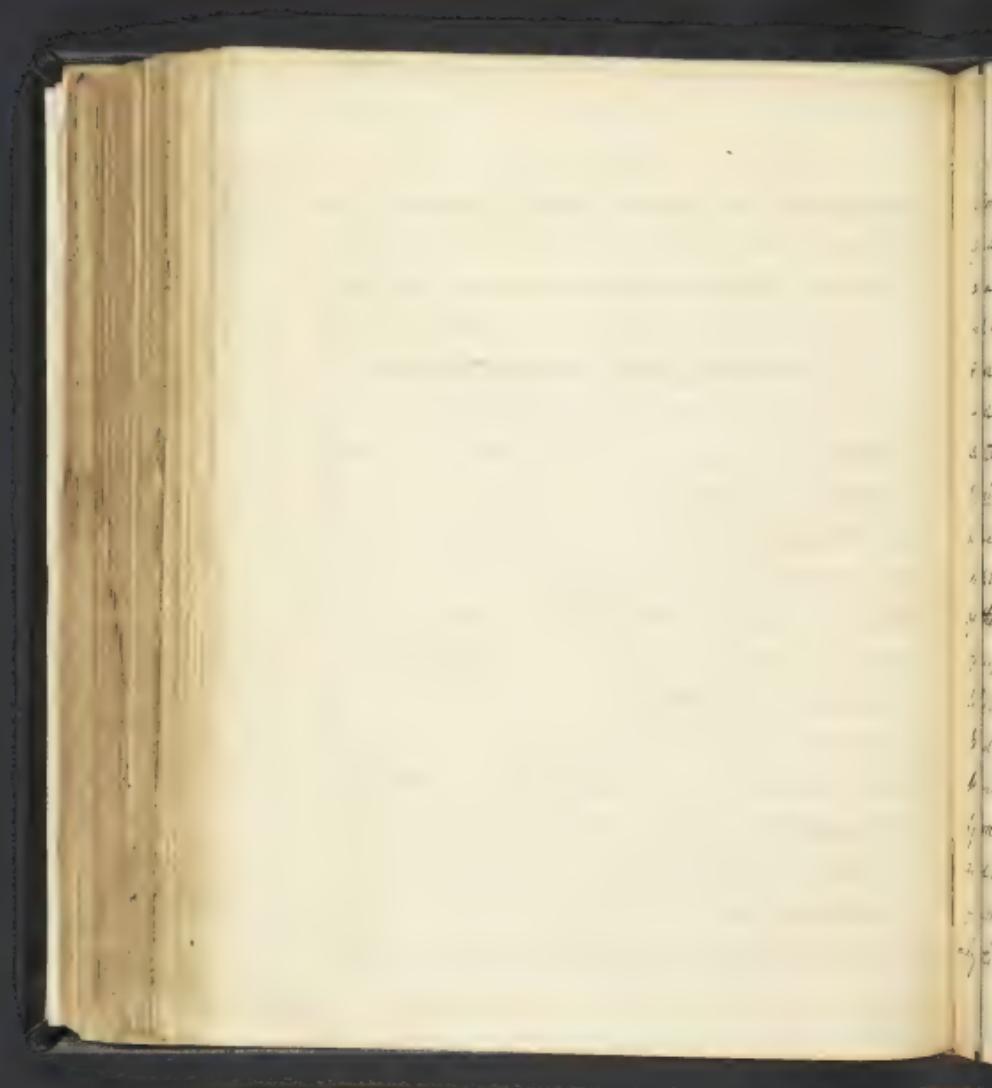
Kanji Test 10

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intervals, then have recourse to tonics immediately one author whose name I can't remember says he administered the bark before the remission was complete, and days he was subject to it, on account of the great tendency of that climate (one of the East Indies) to turn into a low fever - certain other places are recorded where the bark was given before any attention had been paid to cleansing the alimentary canal -

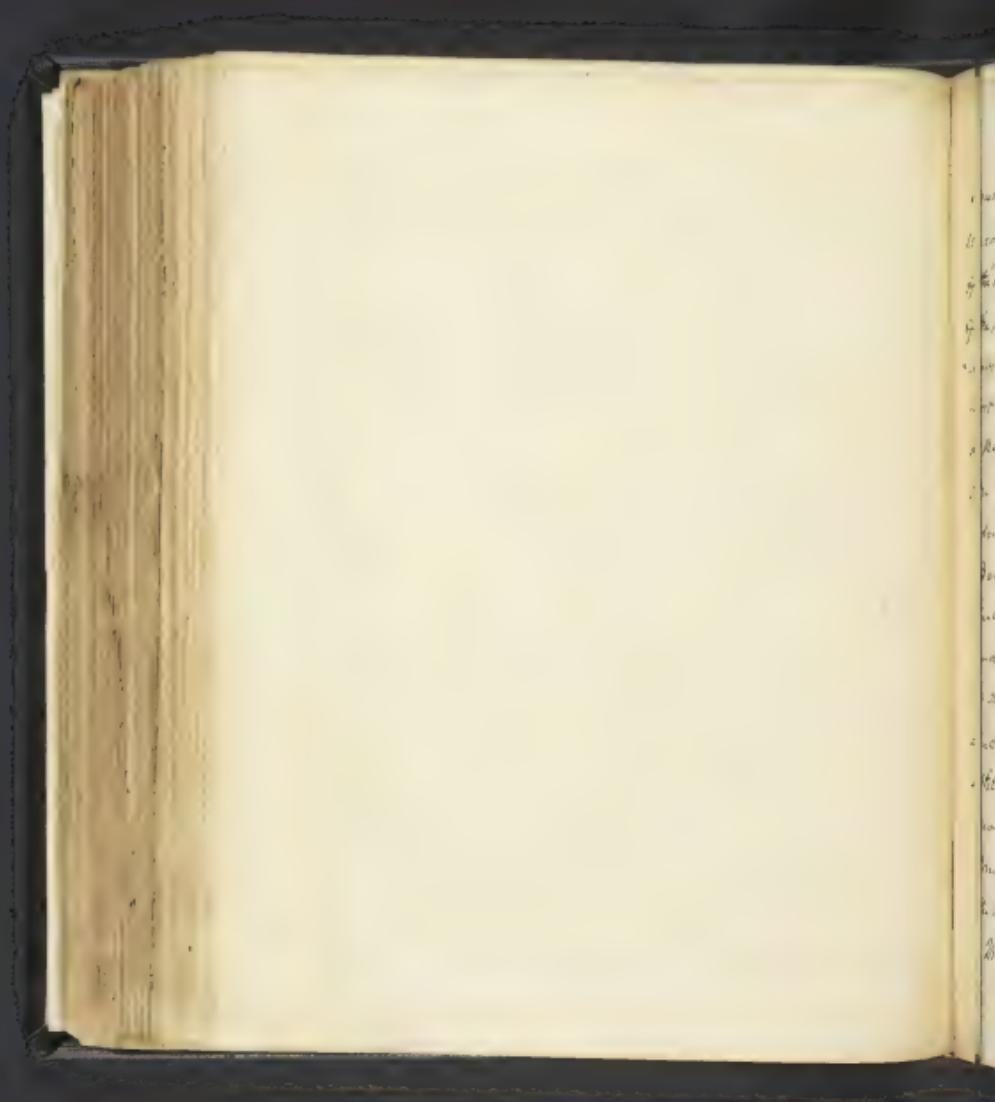
Age - The first period from commencing with tonics is different in children from what it is in adults in children it is more apt to be inflammatory, and we defer their use for three days in old people the course will respond equally well -

Constitution - The diversity in the constitution of different patients will alter very this period - thus in stout robust patients it will be best to prepare the system as we find in bark or senna-tonics, while debilitated and cachectic habits will not bear up impurities, the delay - the stomach also is at times in too irritable a



a condition that much time elapses before we can  
get it to obtain our remedies - It may I think be stated  
as a general rule in this climate that tonics should  
not be used until by our antiphlogistic measures we  
shall have subdued all inflammatory disposition  
and the stomach thoroughly cleared of all noxious  
contents -

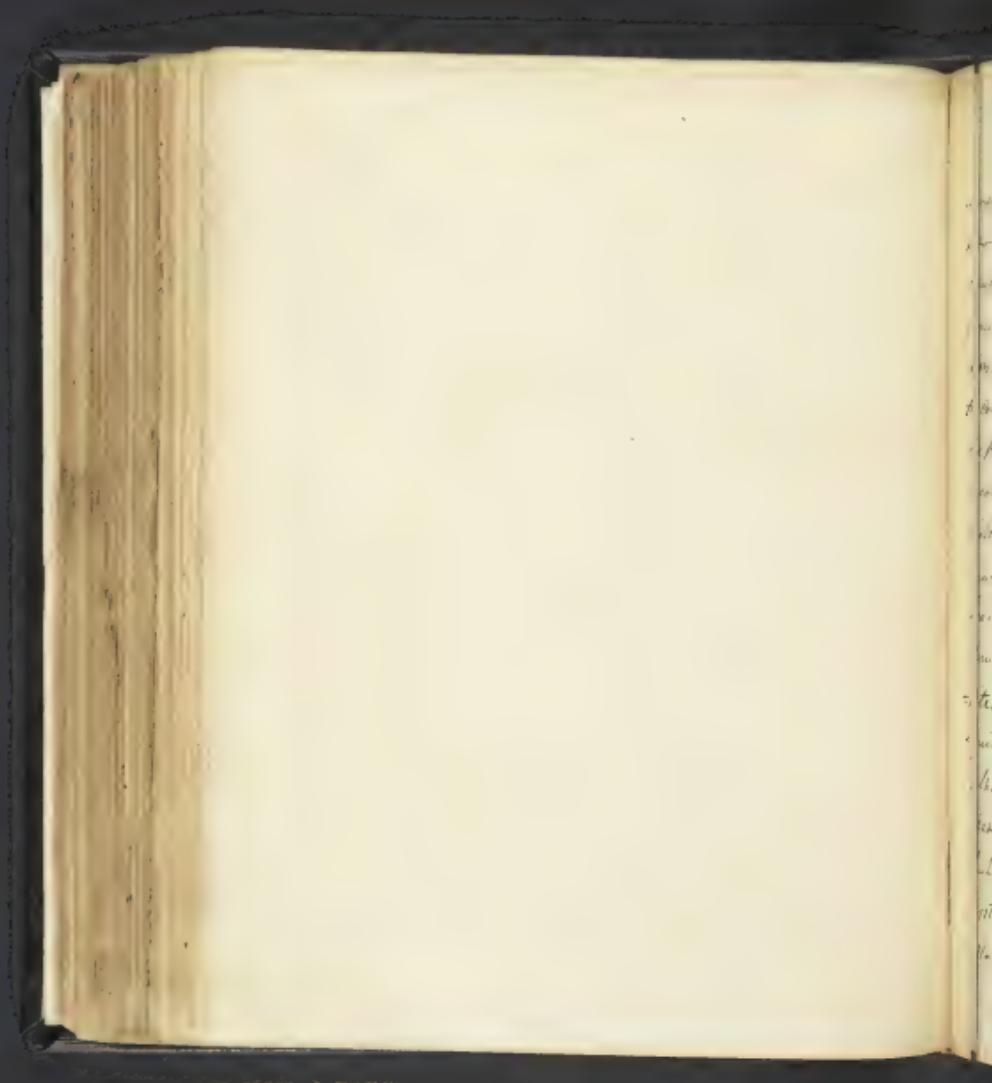
Prizes. There are but few articles of the Naturae Medicinae which  
have not at some time or another been introduced as a tonic  
into the treatment of Intermittent fevers, and not a few  
of them during their evolution in some countries at  
least - At the present day Practitioners habitually  
rely on the Peruvian Bark for the cure of this disease  
and resort under certain peculiarities of Circumstance  
to some he found sufficient for this purpose when aided  
by attention to the several systems - On this account there  
and to the objection I fear to dwelling the bulk of this essay  
wishes than I can avoid I shall confine myself chief-  
ly to this substance as a tonic - Ones do however other



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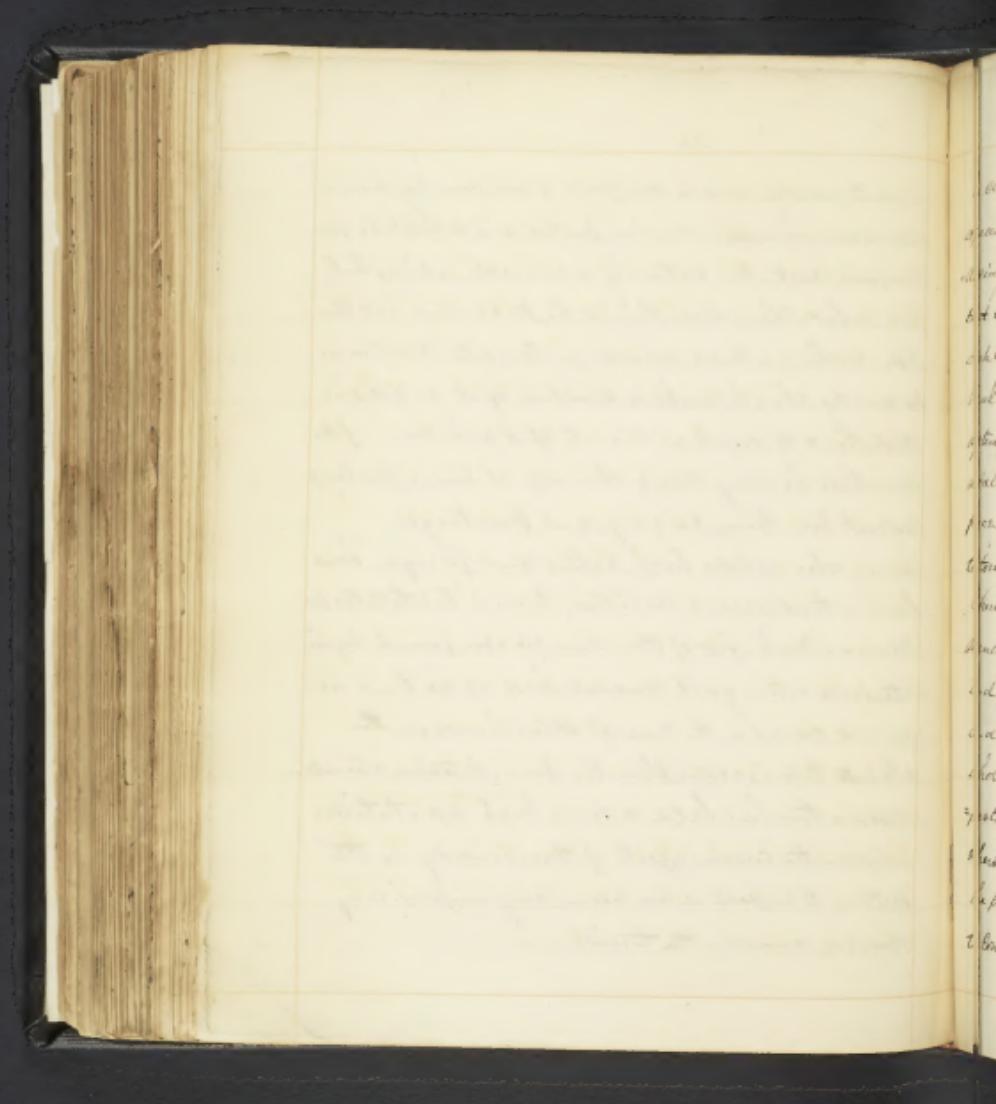
sueur however where it will be necessary to change this  
remedy and resort to some other ... until the insensibility  
of the system is again awakened to the bark. Several  
of the preparations of the Bark are now made to succeed-  
ingly treat and to concentrate as scarcely to offend the  
most delicate stomach and on this account may well  
be preferred to the bark in substance which when the  
stomach will bear it is the most efficacious mode of  
administration.

Bark may be given in substance infusion decoction  
tincture &c in various extracts but in case of Lichen &c  
and in long Continued Cases it will be advantageous  
to change from one to the other to prevent the infi-  
lence of habit or even to lay it aside for a time sub-  
stituting some other medicine as *Serpentaria Virginiana*  
given in the same shades as we do the Bark - a  
Combination of these two articles particularly with  
the Carbonate of Ardeæ has been highly recommended  
The *Eupatorium Perfoliatum* has long been advo-



advantageously used in some parts of our Country and is also known in medical practice as a substitute for Peruvian Bark. We certainly a valuable article, but from what I have seen, should be prescribed with caution. Nothing is more common in domestic practice in the Country than to make a decoction of it and desire the patient to drink as much of it as he can if the decoction be very strong this will at times produce violent vomiting, purging, and sweating &c.

Many other articles both native and foreign have been introduced as auxiliary to, and substitutes for Peruvian Bark. few of them now are ever found Regius after some contingent remedies had at one time acquired credit in the cure of this disease, as the Sulphate Cupri, acetum plumbi, Lino, Catechu alumine. Arsenic too has held a very high reputation, but from the known effects of this remedy on the system I suspect it has been very improperly classed among the tonics —



In certain chronic and protracted cases of the complaint  
Specially when depending on various irregularities pro-  
ducing relapse after relapse. It will sometimes happen  
that this course of treatment will altogether fail us.  
Such cases have been successfully treated by merely  
breaking up and destroying the morbid peculiarity of  
System, upon which the disease now depends; even if  
a calviation does not effect so much it will probably  
place the system in such a condition that a recurrence  
to tonic will now finish the cure.

When such means prove abortive it has been recom-  
mended to send the patient on a long journey  
and by thus changing his air, food, exercise, dress  
and company to bring about a revolution of his  
whole system this will make our most ardent ex-  
pectation, in three cases, but unfortunately in  
these after a protracted bilious Intermittent  
the poor patient will be too much debilitated  
to comply with such advice.

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